

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18759

Entity Name: THE AMERICAN BOARD OF PATHOLOGY RESEARCH
FOUNDATION, INC.**FILED**
Jan 12, 2021
Secretary of State
9991057677CC**Current Principal Place of Business:**4830 W. KENNEDY BLVD.
SUITE 690
TAMPA, FL 33609-2571**Current Mailing Address:**ONE URBAN CENTRE
4830 W. KENNEDY BLVD. SUITE 690
TAMPA, FL 33609 US**FEI Number: 59-2849264****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOHNSON, REBECCA L. M.D.
4830 W. KENNEDY BLVD., SUITE 690
TAMPA, FL 33609 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE: REBECCA L. JOHNSON, M.D.****01/12/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO
Name	JOHNSON, REBECCA L M.D.
Address	4830 WEST KENNEDY BLVD SUITE 690
City-State-Zip:	TAMPA FL 33609

Title	PRESIDENT
Name	ASHWOOD, EDWARD R DR.
Address	UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS SCHOOL OF MEDICINE 12401 E 17TH AVENUE LEPRINO BUILDING, ROOM 299
City-State-Zip:	AURORA CO 80045

Title	SECRETARY
Name	NAYAR, RITU DR.
Address	NORTHWESTERN MEMORIAL HOSPITAL GALTER PAVILION, ROOM 7-132-B 251 EAST HURON STREET
City-State-Zip:	CHICAGO IL 60611

Title	IMMEDIATE PAST PRESIDENT
Name	SWERDLOW, STEVEN H DR.
Address	DIRECTOR , DIVISION OF HEMATOPATHOLOGY UPMC HEALTH SYSTEM-UPMC PRESBYTERIAN 200 LOTHROP STREET-ROOM G-334
City-State-Zip:	PITTSBURGH PA 15213-2582

Title	VP, TREASURER
Name	JEFFREY, GOLDSTEIN D DR.
Address	UCLA, DEPT OF PATH AND LAB MEDICINE 10833 LE CONTE AVENUE; BOX 951732; CHS ROOM 13-145C
City-State-Zip:	LOS ANGELES CA 90095-1732

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REBECCA JOHNSON, MD**CHIEF EXECUTIVE
OFFICER****01/12/2021**

Electronic Signature of Signing Officer/Director Detail

Date